

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## BESTAVAILABLE COPY FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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|-----------------------|-------|----------|---------------|
| OMB                   | APP   | ROVAL    | · · · · · · · |
| OMB Num               | ber:  | 323      | 5-0076        |
| Expires:              | Apr   | il 30.2  | 008           |
| Expires:<br>Estimated | avera | age burc | en            |
| hours per r           | espo  | nse      | .16.00        |

| SEC USE ONLY  |  |        |  |  |  |  |  |  |
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| Prefix        |  | Serial |  |  |  |  |  |  |
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| DATE RECEIVED |  |        |  |  |  |  |  |  |
|               |  |        |  |  |  |  |  |  |

| Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  PUDA COAL, INC.   |  |
|---|--|
| Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment   | ULOE   |
| Type of Timig.  | r seam abrel qual bean sease mea mar siste i indicata in indicata indica |
| A. BASIC IDENTIFICATION DATA  |  |
| 1. Enter the information requested about the issuer   | Alana kana bina kana bina kana bina kana bina kana bina bina bina bina bina bina bina b  |
| Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  | 05073387   |
| PUDA COAL, INC.   |  |
| Address of Executive Offices (Number and Street, City, State, Zip Code)   | Telephone Number (Including Area Code)   |
| 426 Xuefu Street, Taiyuan City, Shanxi Province, China Address of Principal Business Operations (if different from Executive Offices)  (Number and Street City State, Zip Code)   | +86 (351) 228-1300 Telephone Number (Including Area Code)  |
| Brief Description of Business DEC 3 N 2005 O  | RMODO  |
| Coking coal cleaning and processing.  | RECD S.E.C.  |
| THOMSON /   | DEC 5 2005   |
| Type of Business Organization FINANCIAL corporation limited partnership, already formed other (p  | lease specify):  |
| business trust   limited partnership, to be formed  | 5-2-1  |
| Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)  GENERAL INSTRUCTIONS   | CN   |
| Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D of 77d(6).  | or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.   |
| When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be which it is due, on the date it was mailed by United States registered or certified mail to that address.  |  |
| Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20:  | 549.   |
| Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.  | y signed. Any copies not manually signed must be   |
| Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously supplement be filed with the SEC.   |  |
| Filing Fee: There is no federal filing fee.   |  |
| State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for st ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the S are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law. this notice and must be completed. | ecurities Administrator in each state where sales the exemption, a fee in the proper amount shall  |
| ATTENTION   |  |
| Failure to file notice in the appropriate states will not result in a loss of the federal ex appropriate federal notice will not result in a loss of an available state exemption unle filing of a federal notice.  |  |

#### A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ☐ Promoter Check Box(es) that Apply: Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Zhao, Ming Business or Residence Address (Number and Street, City, State, Zip Code) 426 Xuefu Street, Taiyuan City, Shanxi Province, China Check Box(es) that Apply: Beneficial Owner Promoter Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Zhao, Yao Business or Residence Address (Number and Street, City, State, Zip Code) 426 Xuefu Street, Taiyuan City, Shanxi Province, China Check Box(es) that Apply: ☐ Beneficial Owner Executive Officer Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Jin, Xia Business or Residence Address (Number and Street, City, State, Zip Code) 426 Xuefu Street, Taiyuan City, Shanxi Province, China ☐ Beneficial Owner ☐ Executive Officer Check Box(es) that Apply: Director Director Promoter General and/or Managing Partner Full Name (Last name first, if individual) Wang, Lisheng Business or Residence Address (Number and Street, City, State, Zip Code) 426 Xuefu Street, Taiyuan City, Shanxi Province, China Check Box(es) that Apply: ☐ Director Promoter General and/or Managing Partner Full Name (Last name first, if individual) Keating Reverse Merger Fund, LLC Business or Residence Address (Number and Street, City, State, Zip Code) c/o Timothy J. Keating, Manager, 5251 DTC Pkwy., Suite 1090, Greenwood Village, CO 80111 Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

| Alice Code  |   |                | 1.                                    | Bril                 | NFORMAT              | ION ABOU                                 | T OFFERI                              | NG                |  |          |                                       |                |
|---|---|----------------|---------------------------------------|----------------------|----------------------|--|---------------------------------------|-------------------|--|----------|---------------------------------------|----------------|
| 1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?  |   |                |                                       |                      |                      |  |                                       | Yes               | No                                     |          |                                       |                |
| I. Has t  | ne issuer soid  | , or does u    |                                       |                      |                      |  |                                       |                   | •                                      |          |                                       | X              |
| Answer also in Appendix, Column 2, if filing under ULOE.  2. What is the minimum investment that will be accepted from any individual?  |   |                |                                       |                      |                      |  |                                       |                   | s 25,                                  | 000.00   |                                       |                |
| 2. What is the minimum investment that will be accepted from any individual?  |   |                |                                       |                      |                      |  |                                       | Φ <u>·</u><br>Yes |  |          |                                       |                |
| 3. Does   | 3. Does the offering permit joint ownership of a single unit? |                |                                       |                      |                      |  |                                       |                   | l es                                   | No<br>🗷  |                                       |                |
|   | the informat  |                |                                       |                      |                      |  |                                       |                   |  |          |                                       |                |
| commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. |   |                |                                       |                      |                      |  |                                       |                   |  |          |                                       |                |
|   | e (Last name t<br>Securities, LI                              |                | ividual)                              |                      |                      |  |                                       |                   |  |          |                                       |                |
|   | or Residence  |                | lumber and                            | 1 Street, C          | ity. State. 7        | Zip Code)                                |                                       |                   |  |          |                                       |                |
|   | C Pkwy., Suit   |                |                                       |                      | -                    | - '                                      |                                       |                   |  |          |                                       |                |
|   | Associated Br   |                |                                       | <u> </u>             |                      |  | · · · · · · · · · · · · · · · · · · · |                   |  |          |                                       |                |
|   |   |                |                                       |                      |                      |  |                                       | ·····             |  |          |                                       |                |
|   | Which Person  |                |                                       |                      |                      |  |                                       |                   |  |          |                                       |                |
| (Che  | ck "All States  | " or check     | individual                            | States)              |                      | •••••                                    |                                       |                   |  |          | ☐ Al                                  | l States       |
| AL  | AK  | AZ             | AR                                    | CA                   | <b>60</b>            | [CT]                                     | DE                                    | DC                | FL                                     | GA       | HI                                    | ID             |
| IL  | IN  | IA             | KS                                    | KY                   | LA                   | ME                                       | MD                                    | MA                | MI                                     | MN       | MS                                    | MO             |
| MT  | NE  | NV             | NH                                    | NJ                   | NM                   | NY                                       | NC                                    | ND                | OH                                     | OK       | OR                                    | PA             |
| RI  | SC  | SD             | TN                                    | TX                   | UT                   | VT                                       | VA                                    | WA                | WV                                     | WI       | WY                                    | PR             |
| Full Name   | e (Last name t  | first, if ind  | ividual)                              |                      |                      |  |                                       |                   |  |          |                                       |                |
|   | or Residence  |                | Number an                             | d Street, C          | City, State,         | Zip Code)                                |                                       |                   |  |          |                                       |                |
|   | e Investment  |                |                                       |                      |                      |  |                                       |                   |  |          |                                       |                |
|   | Associated Br<br>Military Trai                                |                |                                       | oton EI ´            | 22/21                |  |                                       |                   |  |          |                                       |                |
|   | Which Person  |                |                                       |                      |                      | Purchasers                               |                                       |                   |  |          | _                                     |                |
|   | ck "All States  |                |                                       |                      |                      |  |                                       |                   |  |          |                                       | States         |
| AL  | AK  | AZ             | AR                                    | CA                   | CO                   | CT                                       | DE                                    | DC                | FL                                     | GA       | HI                                    | [ID]           |
| IL  | IN  | IA             | KS                                    | KY                   | LA                   | ME                                       | MD                                    | MA                | MI                                     | MN       | MS                                    | MO             |
| MT  | NE  | NV             | NH                                    | NJ                   | NM                   | NY                                       | NC                                    | ND                | ОН                                     | OK       | OR                                    | PA             |
| RI  | SC  | SD             | TN                                    | TX                   | UT                   | VT                                       | VA                                    | $\overline{WA}$   | $\overline{WV}$                        | WI       | WY                                    | PR             |
| Full Name   | e (Last name t  | first, if ind  | ividual)                              |                      |                      | 7. · · · · · · · · · · · · · · · · · · · |                                       |                   |  |          |                                       |                |
| Business  | or Residence  | Address ()     | Number an                             | d Street, C          | City, State, 2       | Zip Code)                                |                                       |                   | ······································ |          | · · · · · · · · · · · · · · · · · · · | 3. <u>3</u>    |
|   | Merchant Gro  | ·              | · · · · · · · · · · · · · · · · · · · | a oncon, c           | ,, 5,                |  |                                       |                   |  |          |                                       |                |
|   | Associated Br   |                | aler                                  |                      |                      |  |                                       |                   |  |          |                                       |                |
|   | Street, 38th  |                |                                       |                      |                      |  |                                       |                   |  |          |                                       |                |
|   | Which Person  |                |                                       |                      |                      |  |                                       |                   |  |          |                                       | _              |
| (Che  | ck "All States  | " or check     | individual                            | States)              |                      |  | •••••                                 |                   | ••••••                                 |          | ☐ All                                 | States         |
| AL  | AK  | AZ             | AR                                    | CA                   | CO                   | CT                                       | DE                                    | DC                | FL                                     | GA       | HI                                    | ID             |
| IL  |   |                |                                       |                      |                      |  |                                       | -                 |  |          |                                       | <del></del>    |
|   |   |                |                                       |                      |                      |  |                                       |                   |  | [WI]     |                                       |                |
|   | AK<br>IN<br>NE<br>SC  | IA<br>NV<br>SD | AR<br>KS<br>NH<br>TN                  | CA<br>KY<br>NJ<br>TX | CO<br>LA<br>NM<br>UT | ME<br>NY<br>VT                           | MD<br>NC<br>VA                        | MA<br>ND<br>WA    | FL<br>MI<br>OH<br>WV                   | MN<br>OK | HI<br>MS<br>OR<br>WY                  | MO<br>PA<br>PR |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

#### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

| 1. | Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check   |                             |                                      |
|----|--|-----------------------------|--------------------------------------|
|    | this box and indicate in the columns below the amounts of the securities offered for exchange and  |                             |                                      |
|    | already exchanged.   | A                           | America Alberta                      |
|    | Type of Security   | Aggregate<br>Offering Price | Amount Already<br>Sold               |
|    | Debt   | \$                          | \$                                   |
|    | Equity   |                             |                                      |
|    | Common Preferred   |                             |                                      |
|    | Convertible Securities (including warrants) 297 Units*   | \$ 17,652,000.00            | \$_17,652,000.00                     |
|    | Partnership Interests  |                             |                                      |
|    | Other (Specify)  |                             |                                      |
|    | Total  | \$ 17,652,000.00            | \$ 17,652,000.00                     |
|    | Answer also in Appendix, Column 3, if filing under ULOE.   |                             |                                      |
| 2. | Enter the number of accredited and non-accredited investors who have purchased securities in this  |                             |                                      |
| -  | offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."   |                             |                                      |
|    |  | Number<br>Investors         | Aggregate Dollar Amount of Purchases |
|    | Accredited Investors   | 67                          | § 7,425,000.00                       |
|    | Non-accredited Investors   |                             | \$ 0.00                              |
|    | Total (for filings under Rule 504 only)  |                             | \$                                   |
|    | Answer also in Appendix, Column 4, if filing under ULOE.   |                             | ·                                    |
| 3. | If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. |                             |                                      |
|    | Type of Offering   | Type of<br>Security         | Dollar Amount<br>Sold                |
|    | Rule 505   | -                           | \$                                   |
|    | Regulation A   |                             | \$                                   |
|    | Rule 504   |                             | \$                                   |
|    | Total  |                             | \$ 0.00                              |
| 4  | a. Furnish a statement of all expenses in connection with the issuance and distribution of the   |                             |                                      |
| 7  | securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.                                    |                             |                                      |
|    | Transfer Agent's Fees  |                             | \$                                   |
|    | Printing and Engraving Costs   |                             | \$                                   |
|    | Legal Fees   | <b>v</b>                    | \$_25,000.00                         |
|    | Accounting Fees  |                             | \$                                   |
|    | Engineering Fees   |                             | \$                                   |
|    | Sales Commissions (specify finders' fees separately) ***   |                             | § 668,250.00                         |
|    | Other Expenses (identify) Blue Sky Filing Fees   |                             | \$_1,925.00                          |
|    | Total  |                             | \$ 695,175.00                        |
|    |  |                             |                                      |

<sup>\*</sup>Each Units consists of (1) an 8% unsecured convertible promissory note of which each note is convertible into 25,000 common shares of stock of the issuer and (2) a five-year warrant of which each warrant is convertible into 50,000 common shares of stock of the issuer.

<sup>\*\*</sup>In addition to cash proceeds, the placement agent is entitled to purchase up to 2,500,000 warrants at a purchase price of \$.60 per warrant of which each warrant is convertible into one common share of the issuer.

| and total expenses furnished in response i   | gegate olieriag price given<br>to Part C — Question 4.a.   | in response to Pari ()<br>This difference is the %   | is distronguess, sieter<br>Onesiano ?<br>Insectionos   | ***  |
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| <ol> <li>Indicate below the amount of the adjust<br/>such of the purposes shown. If the am<br/>check the box to the left of the estimate,<br/>proceeds to the issuer set forth in resp.</li> </ol>             | iount for any purpose is n<br>The total of the payments  | ot known, farmsh in s<br>listed raist signed the ad  | svenate suit   |  |
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| Working capital  |  |  |  |  |
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| The issuer has duly caused this notice to be si<br>signature constitutes an undertaking by the :   | gred by the undersigned discuss to the U.S.  | ely authorized person.<br>. Socurities and Excha   | if this potice is Necimbe<br>19 <b>e</b> Commission, area  | ler Nade 201. Die Selbereine   |
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| The issuer has duly esused this notice to be si signature constitutes an undertaking by the cone intermation furnished by the Issuer to state (Punc in Type)  PUDA COAL INC                                    | gned by the undersigned discussion to the Congression of the Congressi | ely authorized person.<br>. Socurities and Excha   | ffilis notice is Eferium<br>upe Commission, upon<br>u(b)(I) of Rule 502.   | er Ruk 201. In Sella and Switten request of its early  |
| The issuer has duly exused this notice to be si signature constitutes an undertaking by the side information furnished by the issuer to a issuer (Princial Type)  PUDA COAL_INC Name of Signer (Print or Type) | gned by the undersigned discussion to the Congression of the Congressi | nly authorized pezson Socurities and lizohan r musuaut to puragrap   | ffilis notice is Eferium<br>upe Commission, upon<br>u(b)(I) of Rule 502.   | er Rude 201. The Sallesson -<br>willten respues a literault  |
| The issuer has duly exused this notice to be si signature constitutes an undertaking by the side information furnished by the issuer to a issuer (Princial Type)  PUDA COAL_INC Name of Signer (Print or Type) | good by the undersigned dissuer to thingship to fire (7.2 my non-secretified investo Signstate)    Title of Sign   | nly authorized pezson Socurities and lizohan r musuaut to puragrap   | ffilis notice is Eferium<br>upe Commission, upon<br>u(b)(I) of Rule 502.   | er Rude 164. To Sallessea -<br>willten respuest a l'incomm   |
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| The issuer has duly exused this notice to be si signature constitutes an undertaking by the cone information funished by the issuer to so issuer (Fina or Type)  PUDA COAL (MC Name of Signer (Print or Type)  | good by the undersigned dissuer to thingship to fire (7.2 my non-secretified investo Signstate)    Title of Sign   | nly authorized pezson Socurities and lizohan r musuaut to puragrap   | ffilis notice is Eferium<br>upe Commission, upon<br>u(b)(I) of Rule 502.   | er Rude 201. The Sallesson -<br>willten respues a literault  |
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| The issuer has duly exused this notice to be si signature constitutes an undertaking by the side information furnished by the issuer to a issuer (Princial Type)  PUDA COAL_INC Name of Signer (Print or Type) | good by the undersigned dissuer to thingship to fire (7.2 my non-secretified investo Signstate)    Title of Sign   | nly authorized pezson Socurities and lizohan r musuaut to puragrap   | ffilis notice is Eferium<br>upe Commission, upon<br>u(b)(I) of Rule 502.   | er Rak not. In Substance withour request of the early and a 2005   |

| ti i   | A CARLON AND A CAR | E STATE SIGNA             | TURE                  |                                       |   |           |              |  |  |
|--------|--|---------------------------|-----------------------|---------------------------------------|---|-----------|--------------|--|--|
| 1.     | Is any party described in 17 CFR 230.262 presprovisions of such rule?  |                           |                       |                                       |   | Yes       | No           |  |  |
|        | See A  | Appendix, Column 5, fo    | or state response.    |                                       |   |           |              |  |  |
| 2.     | The undersigned issuer hereby undertakes to fur D (17 CFR 239.500) at such times as required   |                           | istrator of any state | e in which                            | his notice is fi                        | led a no  | tice on Form |  |  |
| 3.     | The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.  |                           |                       |                                       |   |           |              |  |  |
| 4.     | The undersigned issuer represents that the issu-<br>limited Offering Exemption (ULOE) of the sta-<br>of this exemption has the burden of establishing  | te in which this notice   | is tiled and unders   | tands that                            |   |           |              |  |  |
|        | uer has read this notification and knows the conter<br>thorized person.  | nts to be true and has du | ly caused this notic  | e to be sigr                          | ed on its beha.                         | lf by the | undersigned  |  |  |
|        | Print or Type) A COAL, INC.  | Signature                 | ZXM)                  | V Dat                                 | e<br>Novembei                           | 30,       | 2005         |  |  |
| Name ( | Print or Type)   | Title (Print or Type)     | /                     | , , , , , , , , , , , , , , , , , , , | *************************************** |           |              |  |  |

President

#### Instruction:

Ming Zhao

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

## APPENDIX

| 1     |                   | 2  | 3  |                                      |  | 4  |        | 5   |    |
|-------|-------------------|--|--|--------------------------------------|--|--|--------|---|----|
|       | to non-a investor | to sell<br>ccredited<br>s in State<br>-Item 1) | Type of security<br>and aggregate<br>offering price<br>offered in state<br>(Part C-Item 1) |                                      | Type of investor and amount purchased in State (Part C-Item 2) |  |        | Disqualification<br>under State ULOE<br>(if yes, attach<br>explanation of<br>waiver granted)<br>(Part E-Item 1) |    |
| State | Yes               | No   |  | Number of<br>Accredited<br>Investors | Amount   | Number of<br>Non-Accredited<br>Investors | Amount | Yes   | No |
| AL    |                   | ×  |  | 0                                    | \$0.00   | 0  | \$0.00 |   | ×  |
| AK    |                   | ×  |  | 0                                    | \$0.00   | 0  | \$0.00 |   | ×  |
| AZ    |                   | ×  | 1 Unit/\$55,000  | 1                                    | \$55,000.00  | 0  | \$0.00 |   | ×  |
| AR    |                   | ×  |  | 0                                    | \$0.00   | 0  | \$0.00 |   | ×  |
| CA    |                   | ×  | 38 Units/\$2,166,500   | 14                                   | \$2,166,500.00   | 0  | \$0.00 |   | ×  |
| СО    |                   | ×  | 30 Units/\$2,817,000   | 16                                   | \$2,817,000.00   | 0  | \$0.00 |   | ×  |
| СТ    |                   | ×  | 43 Units/\$2,365,000   | 6                                    | \$2,365,000.00   | 0  | \$0.00 |   | ×  |
| DE    |                   | ×  |  | 0                                    | \$0.00   | 0  | \$0.00 |   | ×  |
| DC    |                   | ×  | 1 Unit/\$55,000  | 1                                    | \$55,000.00  | 0  | \$0.00 |   | ×  |
| FL    |                   | ×  | 1 Unit/\$55,000  | 1                                    | \$55,000.00  | 0  | \$0.00 |   | ×  |
| GA    |                   | ×  |  | 0                                    | \$0.00   | 0  | \$0.00 |   | ×  |
| НІ    |                   | ×  |  | 0                                    | \$0.00   | 0  | \$0.00 |   | ×  |
| ID    |                   | ×  |  | 0                                    | \$0.00   | 0  | \$0.00 |   | ×  |
| IL    |                   | ×  | 50 Units/\$2,750,000   | 3                                    | \$2,750,000.00   | 0  | \$0.00 |   | ×  |
| IN    |                   | ×  |  | 0                                    | \$0.00   | 0  | \$0.00 |   | ×  |
| IA    |                   | ×  |  | 0                                    | \$0.00   | 0  | \$0.00 |   | ×  |
| KS    |                   | ×  |  | 0                                    | \$0.00   | 0  | \$0.00 |   | ×  |
| KY    |                   | ×  |  | 0                                    | \$0.00   | 0  | \$0.00 |   | ×  |
| LA    |                   | ×  |  | 0                                    | \$0.00   | 0  | \$0.00 |   | ×  |
| ME    |                   | ×  |  | 0                                    | \$0.00   | 0  | \$0.00 |   | ×  |
| MD    |                   | ×  |  | 0                                    | \$0.00   | 0  | \$0.00 |   | ×  |
| MA    |                   | ×  | 25 Units/\$1,375,000   | 4                                    | \$1,375,000.00   | 0  | \$0.00 |   | ×  |
| MI    |                   | ×  |  | 0                                    | \$0.00   | 0  | \$0.00 |   | ×  |
| MN    |                   | ×  |  | 0                                    | \$0.00   | 0  | \$0.00 |   | ×  |
| MS    |                   | ×  |  | 0                                    | \$0.00   | 0  | \$0.00 |   | ×  |

### APPENDIX

| 1     |          | 2  | 3  |  |                | 4  |        | 5<br>Disguel  |    |
|-------|----------|--|--|--|----------------|--|--------|---|----|
|       | to non-a | to sell<br>ccredited<br>s in State<br>-Item 1) | Type of security<br>and aggregate<br>offering price<br>offered in state<br>(Part C-Item 1) | Type of investor and<br>amount purchased in State<br>(Part C-Item 2) |                |  |        | Disqualification<br>under State ULOE<br>(if yes, attach<br>explanation of<br>waiver granted)<br>(Part E-Item 1) |    |
| State | Yes      | No   |  | Number of<br>Accredited<br>Investors                                 | Amount         | Number of<br>Non-Accredited<br>Investors | Amount | Yes   | No |
| МО    |          | ×  |  | 0  | \$0.00         | 0  | \$0.00 |   | ×  |
| MT    |          | ×  | 5 Units/\$275,000  | 2  | \$275,000.00   | 0  | \$0.00 |   | ×  |
| NE    |          | ×  | 8 Units/\$440,000  | 4  | \$440,000.00   | 0  | \$0.00 |   | ×  |
| NV    |          | ×  |  | 0  | \$0.00         | 0  | \$0.00 |   | ×  |
| NH    |          | ×  |  | 0  | \$0.00         | 0  | \$0.00 |   | ×  |
| NJ    |          | ×  | 10 Units/\$550,000   | 1  | \$550,000.00   | 0  | \$0.00 |   | ×  |
| NM    |          | ×  |  | 0  | \$0.00         | 0  | \$0.00 |   | ×  |
| NY    |          | ×  | 53 Units/\$2,988,500   | 9  | \$2,988,500.00 | 0  | \$0.00 |   | ×  |
| NC    |          | ×  |  | 0  | \$0.00         | 0  | \$0.00 |   | ×  |
| ND    |          | ×  |  | 0  | \$0.00         | 0  | \$0.00 |   | ×  |
| ОН    |          | ×  |  | 0  | \$0.00         | 0  | \$0.00 |   | ×  |
| OK    |          | ×  |  | 0  | \$0.00         | 0  | \$0.00 |   | ×  |
| OR    |          | ×  |  | 0  | \$0.00         | 0  | \$0.00 |   | ×  |
| PA    |          | ×  | 4 Units/\$220,000  | 1  | \$220,000.00   | 0  | \$0.00 |   | ×  |
| RI    |          | ×  |  | 0  | \$0.00         | 0  | \$0.00 |   | ×  |
| SC    |          | ×  |  | 0  | \$0.00         | 0  | \$0.00 |   | ×  |
| SD    |          | ×  |  | 0  | \$0.00         | 0  | \$0.00 |   | ×  |
| TN    |          | ×  |  | 0  | \$0.00         | 0  | \$0.00 |   | ×  |
| TX    |          | ×  | 28 Units/\$1,540,000   | 4  | \$1,540,000.00 | 0  | \$0.00 |   | ×  |
| UT    |          | ×  |  | 0  | \$0.00         | 0  | \$0.00 |   | ×  |
| VT    |          | ×  |  | 0  | \$0.00         | 0  | \$0.00 |   | ×  |
| VA    |          | ×  |  | 0  | \$0.00         | 0  | \$0.00 |   | ×  |
| WA    |          | ×  |  | 0  | \$0.00         | 0  | \$0.00 |   | ×  |
| wv    |          | ×  |  | 0  | \$0.00         | 0  | \$0.00 |   | ×  |
| WI    |          | ×  |  | 0  | \$0.00         | 0  | \$0.00 |   | ×  |

## APPENDIX

| 1     |                      | 2                                  | 3  | :   | 4      |                                    |        |     |    |  |
|-------|----------------------|------------------------------------|--|---|--------|------------------------------------|--------|-----|----|--|
|       | to non-a<br>investor | to sell<br>ccredited<br>s in State | Type of security and aggregate offering price offered in state | Disqualific under State I  (if yes, atta  Type of investor and explanation amount purchased in State waiver gra |        |                                    | **     |     |    |  |
| State | Yes                  | -Item 1) No                        | (Part C-Item 1)  | Number of<br>Accredited<br>Investors  | Amount | Number of Non-Accredited Investors | Amount | Yes | No |  |
| WY    |                      | ×                                  |  | 0   | \$0.00 | 0                                  | \$0.00 |     | ×  |  |
| PR    |                      | ×                                  |  | 0   | \$0.00 | 0                                  | \$0.00 |     | ×  |  |